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Bib Data Sheet

CONFIRMATION NO. 2803

<b>SERIAL NUMBER</b> 09/996,427	<b>FILING DATE</b> 11/19/2001 <b>RULE</b>	<b>CLASS</b> <del>600</del> 239	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> SMI0038.US	
<b>APPLICANTS</b> Paul E. Salyer, Warsaw, IN; Todd A. Wolford, Goshen, IN; Mark A. Nordman, Burket, IN;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/349,381 07/09/1999 <b>0409,732</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 12/10/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i>		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 48	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Todd T. Taylor TAYLOR & AUST, P.C. P.O. Box 560 142 S. Main St. Avilla, IN 46710					
<b>TITLE</b> Tool driver					
<b>FILING FEE RECEIVED</b> 622	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT. No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		